

89479073

1a	65	Kolene	} 6000 P.
1b	65	Kolene	
1c	135	Sodium Hydroxide Solids w/ Sulfides	

Please print or type. (Form designed for use on elite (12-pitch typewriter).)

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. C.A.D.08651000591234		Manifest Document No. 91234		2. Page 1 of 1		Information in the shaded areas is not required by Federal law.	
3. Generator's Name and Mailing Address McDonnell Douglas Aircraft Co. 19503 S. Normandie Avenue Torrance, CA 90502						A. State Manifest Document Number 89479073			
4. Generator's Phone (213) 533-6677 K. L. Anderson 722 M/S C6-10						B. State Generator's ID H.A.H.Q.3.6.0.0.5.6.9.8			
5. Transporter 1 Company Name Ward-Barker, Inc.			6. US EPA ID Number C.A.D.98115711177			C. State Transporter's ID 101500		D. Transporter's Phone (213)432-7266	
7. Transporter 2 Company Name			8. US EPA ID Number			E. State Transporter's ID		F. Transporter's Phone	
9. Designated Facility Name and Site Address USPCI Grassy Mountain Facility U.S. Pollution Control, Inc. 3 Mi.E., 7 Mi.N. Knolls Ex. 41 Clive, Ut. 84074						10. US EPA ID Number UUTID19113011748			
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)						12. Containers No. Type		13. Total Quantity	
a. Waste Oxidizer, Corrosive Solid, n.o.s., Oxidizer NA9194, (D002,D003)						0108 DIF		013121010 P	
b. Waste Oxidizer, Corrosive Solid, n.o.s., Oxidizer NA9194, (D002,D003,D007)						0107 DIF		02121010 P	
c. Waste Poisonous Solid, n.o.s., Poison B, UN2811 (D003)						0126 DIF		11516100 P	
d.									
J. Additional Descriptions for Materials Listed Above (11a) Waste Kolene Descale Tank #90 (GM89-1122-89) (11b) Waste Kolene Paint Stripper Tank #446 (GM89-1010-89) (11c) Waste Sodium Hydroxide W/Sulfides (GM90-0919-90)						K. Handling Codes for Wastes Listed Above a. b. c. d.			
15. Special Handling Instructions and Additional Information (11a) & (11b) Use Guide # 45 (11c) Use Guide # 53 Wear proper protective clothing when handling.						USPCI Confirmation # 25340 June 5, 90 A.M. Profile #15193 & 15195 Profile #35151 Return to MDAC if Rejected.			
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.									
Printed/Typed Name Kris L. Anderson Agent for M.D.A.C.						Signature <i>[Signature]</i>		Month Day Year 05 31 90	
17. Transporter 1 Acknowledgement of Receipt of Materials						Printed/Typed Name PETER LINDSEY		Signature <i>[Signature]</i>	
18. Transporter 2 Acknowledgement of Receipt of Materials						Printed/Typed Name		Signature	
19. Discrepancy Indication Space						906-10273 A-C			
20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.						Printed/Typed Name Sara Critchlow		Signature <i>[Signature]</i>	
								Month Day Year 06 05 90	

Please print or type. (Form designed for use on elite (12-pitch typewriter))

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IN CASE OF AN EMERGENCY OR SPILL, CALL THE NATIONAL REUSE CENTER 1-800-424-8802; WITHIN CALIFORNIA CALL 1-800-852-7550

GENERATOR

TRANSPORTER

FACILITY

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. C.A.D.0.8.6.5.1.0.0.0.5		Manifest Document No. 9112134		2. Page 1 of 1		Information in the shaded areas is not required by Federal law.	
3. Generator's Name and Mailing Address McDonnell Douglas Aircraft Co. 19503 S. Normandie Avenue Torrance, CA 90502						A. State Manifest Document Number 89479073			
4. Generator's Phone (213) 533-6877 K. L. Anderson 722 M/S C6-10						B. State Generator's ID H.A.H.Q.3.6.0.0.5.6.9.8			
5. Transporter 1 Company Name Ward-Barker, Inc.			6. US EPA ID Number C.A.D.9.8.1.5.7.1.1.7.7			C. State Transporter's ID 101500		D. Transporter's Phone (213)432-7266	
7. Transporter 2 Company Name			8. US EPA ID Number			E. State Transporter's ID		F. Transporter's Phone	
9. Designated Facility Name and Site Address USPCI Grassy Mountain Facility U.S. Pollution Control, Inc. 3 Mi.E., 7 Mi.N. Knolls Ex. 41 Clive, Ut. 84074			10. US EPA ID Number I.U.T.I.D.9.9.1.1.3.0.1.1.7.4.8			G. State Facility's ID		H. Facility's Phone (801)534-0054	
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)				12. Containers No. Type		13. Total Quantity		14. Unit Wt/Vol	
a. Waste Oxidizer, Corrosive Solid, n.o.s., Oxidizer NA9194, (D002,D003)				008 DLF 01312010		P		State 491 EPA/Other D002D003	
b. Waste Oxidizer, Corrosive Solid, n.o.s., Oxidizer NA9194, (D002,D003,D007)				0107 DLF 01218010		P		State 491 EPA/Other D002D003	
c. Waste Poisonous Solid, n.o.s., Poison B, UN2811 (D003)				0126 DLF 1156100		P		State 141 EPA/Other D003	
d.								State D003 EPA/Other	
J. Additional Descriptions for Materials Listed Above (11a) Waste Kolene Descale Tank #90 (GM89-1122-89) (11b) Waste Kolene Paint Stripper Tank #448 (GM89-1010-89) (11c) Waste Sodium Hydroxide W/Sulfides (GM90-0919-90)						K. Handling Codes for Wastes Listed Above a. b. c. d.			
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Printed/Typed Name Kris L. Anderson Agent for M.D.A.C.			Signature <i>[Signature]</i>			Month Day Year 05/31/90			
17. Transporter 1 Acknowledgement of Receipt of Materials									
Printed/Typed Name PETER LINDSEY			Signature <i>[Signature]</i>			Month Day Year 05/31/90			
18. Transporter 2 Acknowledgement of Receipt of Materials									
Printed/Typed Name			Signature			Month Day Year			
19. Discrepancy Indication Space									
20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.									
Printed/Typed Name			Signature			Month Day Year			